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## BIB DATA SHEET

CONFIRMATION NO. 5190

<b>SERIAL NUMBER</b> 10/782,451	<b>FILING or 371(c) DATE</b> 02/19/2004 <b>RULE</b>	<b>CLASS</b> 433	<b>GROUP ART UNIT</b> 3732	<b>ATTORNEY DOCKET NO.</b> IVd15US	
<b>APPLICANTS</b> Hans-Peter Foser, Balzers, LIECHTENSTEIN; Urs Spirig, Balzers, LIECHTENSTEIN; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> GERMANY P 103 48 369.1 10/17/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/14/2004					
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /MICHAEL ROBERT Acknowledged BALLINGER/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> LIECHTENSTEIN	<b>SHEETS DRAWINGS</b> 3	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> John C. Thompson 69 Grayton Road Tonawanda, NY 14150 UNITED STATES					
<b>TITLE</b> Dental restoration and a method for producing a dental restoration					
<b>FILING FEE RECEIVED</b> 932	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		